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May 3, 2002

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To: Community Care for the Aged and Disabled (CCAD) Providers
Primary Home Care/Family Care (PHC/FC) Providers
Day Activity and Health Services (DAHS) Providers
Residential Care (RC) Program Providers
Emergency Response Services (ERS) Program Providers
Home Delivered Meals (HDM) Program Providers
Adult Foster Care (AFC) Providers
Special Services to Persons with Disabilities (SSPD) - Other Providers
Special Services to Persons with Disabilities (SSPD) - 24-Hour Attendant
Care Providers
In-Home and Out-of-Home Respite (IHR/OHR) Program Providers

Subject: Long Term Care (LTC)
Information Letter No. 02-09
Discontinuation of Printed Versions of Community Care Provider Forms
Manual

Effective May 1, 2002, a printed version of the Community Care Provider Forms Manual (CCPFM) will no longer be available. The CCPFM will now be offered only on the Internet.

Revision Notice 02-2 for the CCPFM, mailed April 19, 2002, instructed holders of the CCPFM to remove and recycle all forms and instructions. Please note that while the printed version of the CCPFM is being discontinued, the forms and instructions contained in the manual are still applicable to the programs that utilize the CCPFM. The forms and instructions in the CCPFM will continue to be revised, and providers will continue to be responsible for complying with these revisions. All future revisions to the CCPFM will be available only on the Internet.

The CCPFM may be accessed on the Internet at:

<http://www.dhs.state.tx.us/handbooks/forms/default.asp?HB=CCPFM>

All forms in the CCPFM are currently available in Adobe Acrobat (.PDF) format. The Texas Department of Human Services (DHS) is currently working to have some forms available in Microsoft Word format, so providers will be able to make entries into these forms.

Holders of the CCPFM without Internet access should retain a printed copy. For six months after the date of this letter, DHS will send printed versions of CCPFM revisions to any provider that requests these revisions. After the initial six-month period, this courtesy will cease, and providers will be responsible for accessing CCPFM revisions via the Internet.

To request printed versions of CCPFM revisions during this six-month period, please submit a written request to your contract manager. The request **must** include the following information:

- Contact Name
- Provider Name
- Vendor Number
- Complete Mailing Address
- What Printed Material is being Requested

Please note that providers remain responsible for ensuring they have incorporated any form revisions into their own procedures.

An electronic version of this letter, as well as past Community Care Information Letters can be accessed at
<http://www.dhs.state.tx.us/programs/communitycare/infoletters/index.html>.

Please contact your contract manager or other designated DHS contact, if you have any further questions regarding this information.

Sincerely,

Signature on file

Becky Beechinor
Assistant Deputy Commissioner
Long Term Care Services

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